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Application Number 10/785, 4.16 Applicant(s) Filing **CLAIMS ONLY** May be used for additional claims or ame: AFTER FIRST AMENDMENT AFTER SECOND AMENDMENT CLAIMS Indep Depend Indep Depend Indep Depend Indep . pend Indep Depend /\ 1 /\cdot 2 /\cdot 3 i\cdot 4 52 55 57 / 08 / 09 / 10 / 11 59 61 / 12 / 13 / 14 / 15 63 64 / 16 / 17 / 18 / 19 | 20 | 21 | 22 | 23 | 24 72 73 74 / 25 / 26 / 27 76 29 31. 34 35 36 94 96 99 Total Total Indep Indep Total Total Depend Depend Total Claims Total Claims